

# City of Quincy, Illinois

Office of Zoning and Inspection

706 Maine Street, 3<sup>rd</sup> Floor

Quincy, IL 62301

Phone: (217) 228-4540 FAX: (217) 221-2288

Web: www.quincyil.gov



## APPLICATION FOR BUILDING PERMIT

Applicant to complete sections I-VII (pages 1-2)

DATE RECEIVED: / /

### I. Project & Owner Information

Project Address		Zoning District	
Subdivision	Block	Lot	
Owner's Name	Phone	Email	
Owner's Address	City	State	Zip

### II. Construction Information

<b>A. Occupancy</b> <input type="checkbox"/> Single-family <input type="checkbox"/> Two-family <input type="checkbox"/> Townhouse <input type="checkbox"/> Other _____ (Specify per §302, 2006 IBC)	<b>B. Type of Construction</b> <input type="checkbox"/> Wood Frame (V-B) <input type="checkbox"/> Other: _____ (Specify per §601, 2006 IBC)	<b>C. Type of Improvement (check all that apply)</b> <input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Other (describe below) <input type="checkbox"/> Foundation Only <input type="checkbox"/> Remodel/Alteration <input type="checkbox"/> Change of Use (describe below)
<b>Describe full scope of work</b> _____		

### D. Building Height & Floor Areas

Floor Areas (as applicable) Square Foot (sf)	Existing	Remodel/Alteration	New / Addition	TOTAL per floor
<input type="checkbox"/> Finished Basement <input type="checkbox"/> Unfinished Basement				
First Floor				
Second Floor				
<b>TOTAL LIVING AREA</b>				
<b>Garage:</b> <input type="checkbox"/> Attached <input type="checkbox"/> Detached <input type="checkbox"/> Carport				
<b>Detached Accessory Structure</b> <input type="checkbox"/> Shed (no O/H door) <input type="checkbox"/> Pool				
<b>Deck:</b> <input type="checkbox"/> Attached <input type="checkbox"/> Detached				

### E. Building Height & Attributes

Grade at Entrance to	Attributes per Dwelling    Bedrooms:    Bathrooms: Full:    Partial:
Top of Highest Roof:    feet	

### III. Construction Valuation

Total Cost of Project (or material cost, if basis for fee)	\$	*Expected Start Date:	*Expected Completion Date:
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### IV. Designated Responsible Party for Payment of Permit Fee

Role in Project (i.e. general contractor, owner, etc.)			
Name		Company	
Address		City	State    Zip
Phone	Fax	Email	

(Office use only):

Permit # 2013 - \_\_\_\_\_

Receipt # \_\_\_\_\_

Permit Fee Amt. \$ \_\_\_\_\_

<b>V. Contractors / Design Professional (if applicable)</b> (State law requires any project, other than one-and two-family dwellings and agricultural buildings be designed by a Registered Design Professional)			
<b>A. General Contractor</b>			
Contact Person		Company	
Address		City	State
Phone / FAX		Email	
<b>B. Electrical Contractor (City License and Separate Permit Required)</b>			
Phone			
<b>C. Mechanical Contractor (City License and Separate Permit Required)</b>			
Phone			
<b>D. Plumbing Contractor (State License, Contractor Registration and Separate Permit Required)</b>			
Phone			
<b>E. Roofing Contractor (State License Required) LIC #</b>			
Phone			
<b>F. Architect / Engineer (if applicable)</b>			
Name		Company	
Phone / FAX		Email	
<b>VI. Flood Hazard Area</b>			
Development within flooding-prone areas or areas designated as floodplain or Special Flood Hazard Area is <b>PROHIBITED</b> , except as authorized by the City Engineer under a Development Permit (§23.605 – Municipal Code of the City of Quincy)		Subject Property is located in Flood Hazard Area (verify with Engineering Dept.): <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>VII. Applicant's Certificate</b>			
As Owner or the owner's authorized agent of the property for which this application is being filed, I hereby certify, <b>under penalties as provided by law pursuant to 735 ILCS 5/1-109, the following:</b>			
<ol style="list-style-type: none"> <li>1. The description of use and information contained on this application is correct and;</li> <li>2. The structure will not be occupied or used until a Certificate of Occupancy is issued by the Office of Inspection and;</li> <li>3. The project will comply with all current codes and conditions of approval requirements of applicable City Ordinances and pay all fees required by such ordinances and;</li> <li>4. No error or omission in either documents or application, whether said documents or application have been approved by the Building Inspector or not, shall permit or relieve the applicant from constructing the work in any manner other than provided for in the Ordinances of this City relating thereto.</li> <li>5. If other than the owner, I am certifying that the proposed work has been authorized by the owner of record and that I have been authorized by the owner to complete this application on his/her behalf. I will be acting on behalf of the owner as his/her agent.</li> </ol>			
<b>Applicant if other than the Owner:</b> <input type="checkbox"/> Contractor <input type="checkbox"/> Architect / Engineer <input type="checkbox"/> Contract Buyer <input type="checkbox"/> Other _____			
<b>Provide legal address, phone and signature of applicant to affirm the above statements</b>			
Name		Title	
Company		Phone	
Street Address		City	State
		Zip	
Signature		Date	
X			
Application accepted by		Date	
Special Dispensation:			

\*Work authorized under permit must commence within 6 months of issuance and must be completed within one year